

ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY

Water Quality Compliance Assurance Unit 1110 W. Washington Street, MO5415B-1 Phoenix, Arizona 85007 602-771-4612 (voicemail) 602-771-4505 (fax)

BIOSOLIDS OR SEWAGE SLUDGE ANNUAL REPORT FORM FOR REPORTING YEAR 2004

All Preparers (Generators) and Land Applicators	Must Complet	te the Following:
1. General Information		
Date:	NPDES Permi	it # (if applicable):
Company Name (Preparer/Applicator):		
Contact Name:	Title:	
Address:		
Phone: ()	Email:	
Certification: I certify, under penalty of law, that the informati supervision and under a system designed to ensure that qualified petermine whether the applicable biosolids requirements have bee certification including the possibility of fine and imprisonment.	personnel properly	gather and evaluate the information used to
Signature:		Title:
2. Who are you? (Check all that apply)		
Preparer. (A "Preparer is a Generator") The biose (select all that apply)	olids or sewage s	sludge prepared at this site are:
Stored onsiteBeneficially used for Land Application.		
		A ANNAUTO C. C. A
_		
9 Applicator. One who applies biosolids to the land (:	farms, parks, for	ests, reclamation sites)
9 Owner or Operator of a surface disposal site include sites for sludge	ling wastewater tro	eatment plants with surface disposal (final disposal)

3. Disposition of Biosolids.

Preparers - wastewater treatment facilities, composting operations and biosolids processing operations. Complete Parts 3.A, 3.B, 3.C, 3.D, and 3.E of this form (if more room is needed, provide additional sheets) for:

- All applicators used to haul and land apply your biosolids and the amount
- All surface disposal sites to which you sent or took biosolids and the amount
- All land application sites (farms, ranches) where biosolids from your facility were applied in 2003 and the
 amount
- All landfills to which you sent biosolids and the amount
- All composting operations or biosolids processing facilities including "sludge drying operations" to which you sent biosolids and the amount
- All incinerators to which you sent biosolids and the amount

Applicators. Complete Parts 3.C, 3.D, and 3.E. for out of state preparers. Complete Parts 3.F and 3.G of this form. If more room is needed, provide additional sheets) for:

- All preparers (including composting operations, biosolids processing facilities) from which you obtained biosolids
- All application sites (farms, ranches, composting operations) where biosolids were applied in 2003 and the amount.
- All land applicators that are taking biosolids from California generators are required to complete this form and ensure that the California WWTP or preparer is submitting its Annual Report to ADEQ.

Name Of Facility: For Calendar Year:						
	DISPOSITION Do All Report					
Arizona Generators and Pre California Generators – Con	parers – Complete Sections 3.A.	, 3.B, 3.C, and 3.I).			
3.A. Amount Of Biosolic	•					
Are biosolids stored direct	ed lagoons or impoundments? ely on the ground? eatment process of biosolids? _					
Are lagoons used in the tro	eatment process of biosonus:				VAR*	
			HOGEN TREATM	T	Option	
over from the previous yea	How much was stored or left ars? Include any amount WHERE - identify the storage	NONE dry tons	CLASS B dry tons	CLASS A dry tons	Used	
of biosolids.	vineral mentaly the storage			(Circle one) Fecal coliform Salmonella		
			MET	HOD#		
At the end of 2004, how m	uch is still stored on site?	dry tons	dry tons	dry tons		
Where?				(Circle one) Fecal coliform Salmonella		
		METHOD#				
	ds or sewage sludge received atment plant or another AP				s	
NAME OF FACILITY	LOCATION		HOGEN TREATM the <u>incoming</u> bioso		VAR* Option	
1.		NONE	CLASS B	CLASS A	Used	
		dry tons	dry tons	dry tons		
			_	(Circle one) Fecal coliform Salmonella		
			METHOD #			
2.		dry tons	dry tons	dry tons		
				(Circle one) Fecal coliform Salmonella		
			MET	HOD#		
3.C. Total amount of Bio	osolids "Prepared" at the	PAT	 HOGEN TREATN	I IENT	VAR*	

facility during the	e year based on d	aily flow	NONE CLASS B CLASS A			Option Used
			dry tons	dry tons	dry tons	Oseu
					(Circle one)	
					Fecal coliform Salmonella	
				MET	THOD #	
		I from the facility s, landfills, drying				ıg, etc.
NAME OF	LOCATION	DISPOSITION	PAT	THOGEN TREAT	MENT	VAR ^a Optio
RECIPIENT	200111011	**	NONE	CLASS B	CLASS A	Used
1.			tons	dry tons	dry tons	
					(Circle one)	
					Fecal coliform Salmonella	
				MET	HOD#	
2.			tons	dry tons	dry tons	
				•	(Circle one)	
					Fecal coliform Salmonella	
				MET	HOD#	
3.			tons	dry tons	dry tons	
				<u>_</u>	(Circle one)	
					Fecal coliform Salmonella	
				MET	HOD#	
					<u> </u>	
4.			tons	dry tons	dry tons	
					(Circle one)	
					Fecal coliform	
					Salmonella	

5.		tons	dry tons	dry tons	
				(Circle one) Fecal coliform Salmonella	
			MET	HOD#	
6.		tons	dry tons	dry tons	
				(Circle one) Fecal coliform Salmonella	
			MET	HOD#	

^{*} VAR = Vector Attraction Reduction – Which option was used from A.A.C. R18-9-1010 (If Preparer did not perform VAR treatment, then specify "none")

3.E. Preparers <u>must</u> attach analytical results for (metals) pollutants according to A.A.C. R18-9-1012 (Self Monitoring), pathogen reduction results according to A.A.C. R18-9-1006 (Class A and Class B Pathogen Reduction Requirements) and Vector Attraction Reduction results according to A.A.C. R18-9-1010. This reporting is required under A.A.C. R18-9-1014(F) for biosolids produced or further treated at site during the year. Report all pollutant and pathogen results on a 100% dry weight basis.

NOTE: If biosolids are going to a landfill – attach Paint Filter Test and Toxicity Characteristic Leaching Procedure test (TCLP test) per 40CFR261.24

*****Attn: All Arizona Generators, submit additional testing data/ see requirements under Biosolids Requirements in your AZPDES permit (example: Dioxins/dibenzofurans) with this Annual Report

Revised July 2004

^{**} Disposition: Name the Land application, Surface Disposal, Incineration, Composting Operation, EQB (Exceptional Quality Biosolids) Bagging operation, Landfill, Biosolids Processing facility or sludge drying operation site. Example: Hunt Farm, Flagstaff WWTP Surface Disposal site, Northwest Landfill, Western Organics, etc.

3.F. Specific Information on Arizona Land Application Events. ****to be completed by Land Applicators only														
Application Site/Location	Field ID	Amount of Biosolids Applied (in dry tons)	Prepare r	Pathogen Treatment Method	Vector Attraction Reduction Method	Loading Rate	Nitrogen Conc. (Organic + ammonium)	Type Of Crop Grown After Application	Agronomic Rate of Crop Grown	The <u>Cumulative</u> Concentration Of Pollutants (Mg/Kg) In Soil				
Example: Norris Farms, Aztec, AZ		350 Tons	Fountain Hills SD	Class B Alt. 2	Option 9			Corn						
1.										As =	Cd =	Cr =	Cu =	Pb =
										Hg =	Mo =	Ni =	Se =	Zn =
2.										As =	Cd =	Cr =	Cu =	Pb =
										Hg =	Mo =	Ni =	Se =	Zn =
3.										As =	Cd =	Cr =	Cu =	Pb =
										Hg =	Mo =	Ni =	Se =	Zn =
4.										As =	Cd =	Cr =	Cu =	Pb =
										Hg =	Mo =	Ni =	Se =	Zn =
5.										As =	Cd =	Cr =	Cu =	Pb =
										Hg =	Mo =	Ni =	Se =	Zn =
6.										As =	Cd =	Cr =	Cu =	Pb =
					_					Hg =	Mo =	Ni =	Se =	Zn =
7.										As =	Cd =	Cr =	Cu =	Pb =
										Hg =	Mo =	Ni =	Se =	Zn =

Revised May 2004

3.G. Land applicators must attach soils analysis for 2004 if using R18-9-1005(D)(2)), Pathogen Reduction results and VAR results.